

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 10 OF 29

FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Everytown for Gun Safety Action Fund

Full Name (Last, First, Middle Initial) of Payee

Courtyard by Marriott Ann Arbor

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Mailing Address 3205 Boardwalk Street

Amount

City State Zip Code

Ann Arbor MI 48108

					187.59
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Transaction ID : F57.4355

Purpose of Expenditure
LodgingCategory/
Type 002
 Office Sought: ☐ House State: MI
☒ Senate District: 00
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
GARY PETERSCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 1726.18Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Courtyard Santa Barbara Goleta

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2014

Mailing Address 401 Storke Road

Amount

City State Zip Code

Goleta CA 93117

					370.05
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Transaction ID : F57.4160

Purpose of Expenditure
LodgingCategory/
Type 002
 Office Sought: ☒ House State: CA
☐ Senate District: 24
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
LOIS CAPPSCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 37160.81Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Delta Airlines

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2014

Mailing Address 1275 K Street NW
#1200

Amount

City State Zip Code

Washington DC 20005

					479.10
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Transaction ID : F57.4170

Purpose of Expenditure
TravelCategory/
Type 002
 Office Sought: ☒ House State: CA
☐ Senate District: 24
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:
LOIS CAPPSCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 38030.00Disbursement For: ☐ Primary ☒ General
2014 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 1036.74

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)